



Social Services

Service Plan 2015/19

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Service Overview- Social Services

The Social Services Directorate has a wide range of statutory duties and responsibilities. Its primary role is to protect, support and meet the social care needs of vulnerable adults and children, helping them to achieve the best quality of life possible. The directorate comprises three divisions: Adult Services, Children and Young People Services, Business Management and Innovation.

The Directorate's broad functions are:

- Supporting people through periods of difficulty and vulnerability;
- Protecting children and adults from abuse or neglect;
- Providing services which respond well to people, families and communities with differing needs and circumstances; and
- Promoting social inclusion and independence for people who are vulnerable and at risk.

Adult Services provide services for older people and for adults with learning disabilities, physical disabilities, autism or a mental illness. The service provides support to:

- Adults who need care and support to live their lives as independently as possible;
- Adults who are at risk of harm or who may have been harmed;
- People who have sensory impairments;
- Unpaid carers who need support; and
- People who experience problems because of alcohol or drug misuse.

Children and Young People Services focus on seven main areas:

- Children and young people whose families need help and support to look after them;
- Children and young people who are at risk of harm, have been neglected or who may have been harmed;
- Disabled children and young people;
- Children and young people who are looked after ('in care');
- Children and young people involved in offending;
- Young people leaving care; and
- Young people at risk of homelessness.

The Business Management and Innovation Division have responsibility for providing services relating to:

- Safeguarding;
- Financial stability and effective use of resources;
- Commissioning and contracting services;
- Planning and partnerships;
- Workforce development;
- Performance/ quality information systems and management;
- Residential care services for older people and respite care for adults with a learning disability; and
- Equality and diversity, including the 'More than Just Words' Welsh Language Strategy.

Our Service Plan 2015-19

The priorities and actions set out within this plan are aimed at ensuring that we improve the performance of the Council, by:

- Meeting statutory responsibilities, including a focus on preventative services and enablement;
- Providing the right care and support in the right place at the right time and at the right cost;
- Managing within the resources available and creating sustainable social care services through shaping services to get the best possible outcomes for the money available;
- Delivering the Council's Social Services Charter and best practice;
- Being determined to find creative solutions to people's problems and to manage risks effectively;
- Engaging effectively with other social care providers;
- Working in strong and purposeful partnerships;
- Having a stable, skilled and flexible workforce, investing in the development of all our staff and having a collective leadership approach; and
- Effective performance management.

Having a strong and proactive approach to internal review and challenge helps us to achieve informed service development and sustainability in line with requirements of the Local Government (Wales) Measure 2010. Through our work, we continue to set and promote a culture of high standards of performance and an outward looking approach where we challenge ourselves to achieve.

Our service outcomes and their associated objectives for last year were as follows:

Service Outcome 1: People in the Vale of Glamorgan are able to request support and receive help in a timely manner.

Service Objective 1 (SO1)	To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.
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Service Outcome 2: The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion.

Service Objective 2 (SO2)	Through the Council working in co-ordination with other organisations, to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation.
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Service Outcome 3: Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals.

Service Objective 3 (SO3)	To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.
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Each year, the Director and the three Heads of Service produce an Annual Report which outlines for people in the Vale of Glamorgan how effectively Social Services are meeting the needs of service users and carers, how we have delivered on our priorities and what our focus will be for the next 12 months. The Care and Social Services Inspectorate Wales (CSSIW) also provide an overall evaluation of our local Social Services performance on an annual basis. As well as drawing on their own regulatory and other work, inspectors take into account the views of other auditors and inspectors to provide evidence about what they identify as areas of progress and areas of development. Within the Council's framework for service planning, we review our service plan and update it accordingly, ensuring we demonstrate continuous service improvement. The first section of this plan provides a directorate level overview for the next four years outlining what the key challenges are in relation to managing resources, equalities, sustainability, consultation, collaboration and risks. This section of the plan also provides a self-assessment of how we are doing, and what has been achieved in relation to the Service Plan 2014/18 (the service outcomes/objectives). The self-assessment also sets out what we intend to do this year and during the following three years. It is this self-assessment that assists us in reaffirming or redefining our service outcomes and objectives. The final section of this plan provides an action plan of what we will do during the forthcoming year, demonstrating how this will align with our outcomes/objectives and how we will measure performance against these objectives.

Managing Resources

Efficiencies and Savings 2015-19

During 2014/15, the service achieved planned budget savings totalling £713K which was made up of £150K savings for Children and Young People Services and £563K of savings for Adult Services (that includes £293K of savings that relates to over recovery on the budget programme for 2013/14).

The Council is facing significant budgetary pressures and requires all directorates to make substantial savings in the coming years. Over the next three years, Social Services have been tasked with delivering the following savings:

Department	Annual Savings Target £000			Total
	2015/16	2016/17	2017/18	
Social Services	1,468	1,133	320	2,921

Appendix 4 provides a breakdown of the savings required and identifies the service and associated savings. The work done to reshape services and to deliver savings is overseen by the Social Services Budget Programme Management Board attended by the Leader, Cabinet Members, the Managing Director and representatives from the Directorate and from the corporate centre.

Workforce Planning 2015-19

Our workforce is our primary resource, and our objectives are only achievable through the hard work and flexibility which our staff consistently demonstrate. It is vital, therefore that we continue to focus on staff development and succession planning despite the pressures of budget and staffing reduction. The detailed workforce requirements for Social Services are set out in our workforce plan (at appendix 3). This addresses structural requirements, succession planning issues, the employee profile and employee development issues for the service.

Key developmental themes for the service over 2015-19 will include:

- *Ensuring fluidity in staff movement within and across team whilst providing a culture that supports staff through change.* Flexibility of staff will be a key component as services develop;
- *Increasing resilience within teams to ensure that changes in the skill mix enable us to use our diverse workforce appropriately and to operate services at the appropriate scale through collaboration with partners.* This will include reducing the amount of routine work done by our most professionally qualified staff and taking advantage of increased qualification levels at lower grades;
- *Integrating services across social care and health, which will require staff groups to work in different ways and across organisational boundaries.* This will mean not only developing management structures and business systems, but also changes in practice;

- *Encouraging staff to become more skilled in using new technology to support agile working and improve service delivery for the people they support;*
- *Further emphasis on putting succession plans in place, as we have an ageing workforce (particularly at the Team Manager tiers). This requires us to ensure that current and future managers are equipped with the skills required to manage modern Social Services through the implementation of a Team Manager Development Programme;*
- *Helping staff to understand the requirements of major legislative changes, to identify implications this may have for our workforce particularly in terms of ratios of professionally qualified and unqualified staff; and*
- *Continuing to focus on reducing our reliance on agency staff.*

The Directorate has reduced its absence levels by 15% from 13.71 days lost per full time equivalent in 2012/13 to 11.72 days for 2013/14. Despite this improvement and performance which compares favourably with comparator local authorities, sickness absence levels continue to be an area of concern. The 2013/14 figures of 11.72 days lost exceeded the Directorate's target of 10.92 days and this performance also compares less favourably with the overall corporate performance of 8.75 days and the All Wales average of 9.7 days. The half year figures relating to April 2014 to September 2014 continue to demonstrate this trend with 6.31 days lost per FTE which is up on the previous half year figure for 2013/14 of 5.42 days per FTE. The latest quarter 3 figures, show on average 9.04 days were lost per FTE due to sickness absence which is slightly higher than the Directorate's quarter 3 target of 8.19 days per FTE. Within Social Services, it is recognised that a significant number of front line employees undertake physically and/or mentally demanding work and therefore have a higher level of exposure to health risks than office based employees,. During 2013/14, the most common reason for absence was stress-related (not only because of work factors), accounting for 27% of cases.

The turnover of staff during 2013/14 remained relatively stable when compared with other Directorates and with other Social Services Directorates across Wales. Staff turnover for 2013/14 was 7.8% for Social Services which is significantly lower than the corporate figure of 9.3%. This equated to 48 members of staff during the year from an average of 612.5 employees. The half yearly figures for April to September show that turnover has remained relatively static when you compare half yearly figures for 2013 with 2014. For example between April to September 2013, the turnover rate was 3.76% (22 leavers) compared with 3.57% (23 leavers) for April to September 2014.

Equalities 2015-19

Equality is an integral part of providing citizen-focused services. We are committed to promoting and valuing fairness in respect of equality and diversity and ensuring that equality action planning with both our employees and our service users is part of our normal day to day considerations when designing new services or policies.

Our service users and staff come from a range of backgrounds and cultures. We also recognise that many people face different barriers to services and employment and that, as a service provider and employer, we have a responsibility to address these barriers. Equality impact assessments are very important in the way that we do business.

Outlined below are the key equalities challenges that have been identified for the Directorate over the next four years and a plan of how we intend to manage these challenges.

Equality challenges over the next four years	How will it be managed?
Ensuring services are accessible to all who are eligible.	<p>We will continue to take a person-centred approach with all our clients, striving to respect their preferences and circumstances through the maintenance and development of suitable access routes for our services.</p> <p>We will continue to focus on improving access to information and services via the web through the refresh of our web content and Contact OneVale providing effective signposting to services. We have improved access to our facilities for some of our clients as a result of moving staff to the Docks offices, but further redesign work is needed to improve accessibility.</p>
Collecting, analysing and using equality information to improve services for protected groups in accordance with the Equality Act 2010 and the Welsh Public Sector Equality Duty.	<p>The service will continue to work with managers across the Council to improve the collection and reporting of required monitoring data.</p> <p>Through a rigorous equality impact process, the Directorate will continue to work with services to minimise any negative impact of planned service changes on service users.</p>
Complying with the Welsh language requirements and standards in provision of services to promote social inclusion.	The skills requirement for staff will be addressed through Welsh language training and identified Welsh language speakers, including implementation of the 'More than Just Words' Welsh Language Strategy and its associated comprehensive training for staff.

Equality challenges over the next four years	How will it be managed?
Ensuring safeguarding services are accessible to all who require them.	The maintenance and development of suitable access routes for the service needs to comply with the new requirements of the Social Services and Wellbeing (Wales) Act 2014 and this will figure in the overall implementation plan for introducing the legislation.
Implementing the Social Services and Wellbeing (Wales) Act 2014 without detrimental impact on clients.	Completion and ongoing review of the Social Services Wellbeing Act Toolkit will enable us to identify our readiness for implementation of the Act and also to flag up potential areas of inequality. An implementation plan will be put in place to address any assessed shortfalls. Any changes to policy/processes as a result of implementing this new legislation will be subject to Equality Impact Assessments.
To set up a register for sight impaired and hearing impaired children and young people.	<ul style="list-style-type: none"> • Implementation of relevant guidance. We will undertake awareness raising training with staff. When re-launching the sensory impairment service in relation to adults in alignment with Occupational Therapy services, we will review how we provide services to those with sensory impairment at key points of the care pathway (registration, signposting and supporting). • Infants born with conditions such as Visual Impairment (VI), Hearing Impairment (HI) or Dual Sensory Impairment (DSI) are referred directly to the Child Health and Disability (CHAD) Team by the Consultants in Ophthalmology or Audiology. • Babies have routine developmental health checks which will identify at the earliest opportunity any VI/HI concerns requiring investigation and again if found to have a diagnosed or confirmed condition, this will be referred by the specialist to the CHAD Team. • School age children likewise have routine sight/hearing tests where any concerns or changes will be detected. • A multi-agency referral form may also be submitted by the Consultant or health worker involved, if it is felt the child or family has wider needs for support • In each case, the child's name and details are entered as a contact on to a sensory impairment register. • One of the Social Workers in the CHAD Team has developed

Equality challenges over the next four years	How will it be managed?
	<p>expertise and knowledge in working with children with sensory impairments. She has a range of aids and adaptations to offer to children and families to assist in managing the condition. She will also support any other staff working with children who live with VI/HI.</p> <ul style="list-style-type: none"><li data-bbox="1131 288 2049 472">• The practice of maintaining a separate register for children with sensory impairments mirrors that in adult services. There is an annual return of data from the department to the Welsh Government/Sense Cymru on the size and needs of this population.

Sustainability 2015-19

Sustainable development is defined as 'development that meets the needs of the present without compromising the ability of future generations to meet their own needs'. Sustainable development is a way in which we can improve decision making and deliver better services. It is about promoting the social, economic and environmental well-being of an area. Sustainability has become the central organising principle of our work, therefore everything the Council does should embed sustainability at the local level as well as contribute to delivering a more sustainable Wales.

Outlined below are the key sustainability challenges that have been identified for the service over the next four years and a plan of how we intend to manage these challenges.

Sustainability challenges over the next four years	How will it be managed?
Balancing service delivery needs with the requirement to minimise our carbon footprint.	Through the introduction of the telemetry vehicle monitoring service, we are able to analyse data about where staff travel and purpose of travel. This lends itself to supporting improved planning of journeys and ensuring that efficiencies are made while also minimising the carbon footprint due to increased awareness of the impact travel has. We will continue to look at alternative methods such as car sharing and conference calls. We will also adhere to the Corporate Print Strategy.
Financial pressure on commissioned services could undermine their ability to provide care and support.	On-going dialogue with the independent sector and support for their activities where they are consistent with Council priorities will remain a priority, as will the review of commissioning strategies and market position statements.
Sustaining appropriate levels of service delivery and managing customer expectations in a climate of diminishing resources.	Service remodelling and integration will ensure that demand is managed appropriately, prioritised and reviewed. Managing client expectations will be assisted by effective signposting to other sources of preventative support and early intervention.
Retaining organisational knowledge, experience and leadership (workforce recruitment and retention issues).	The annual Workforce Plan will be developed and implemented. We will follow the National Programme for Strategic Leaders and Team Managers. We will use the National Framework for Social Workers where we can access support from the Training and Development Unit.

Sustainability challenges over the next four years	How will it be managed?
Fragility of specialist services	We will collaborate effectively with partners to sustain specialist services. Adopting Regional Services Models ensure future sustainability of specialist services. There are plans with the Health Board for integration of learning disability services. The Council and the Health Board share a wide range of posts.
Enabling individuals, families and communities to support the needs of the most vulnerable.	We will develop community capacity and resilience through promoting social enterprises. Support for the independent sector will include quality framework.
Ability to implement requirements of the Social Services and Wellbeing (Wales) Act 2014	Completion and ongoing review of the Social Services and Well-being Act Toolkit will enable us to identify any areas we need to improve or develop in readiness of Act. An Implementation Plan will be in place to address any shortfalls that are identified via the toolkit. The reshaping services agenda will take into account the requirements of the Act in identifying any new service models that will enable us to meet our duties t. We will be managing client expectations through effective signposting. There will be continued liaison with Welsh Government through the consultation processes for introducing new regulations and codes of practice.
The ability to meet the need of our most vulnerable clients at a time when resources are reducing.	Development of alternative service delivery models and re-shaping services through more integrated arrangements will remain a priority.

Key Service Issues- Consultation

Effective consultation and engagement activities continue to be a key method by which we can gain an understanding of the views of residents and customers and address them appropriately. Consultation/ engagement activities already undertaken or coming up include:

Consultation undertaken 2014-15	Outcome of the consultation
<p>Consulted with vulnerable adults involved in the Protection of Vulnerable Adults (POVA) processes and reported to the Area Adult Protection Committee (AAPC).</p>	<p>Most of the vulnerable adults and carers were satisfied with the protection service received. All felt that if something happened to them again, or to someone they knew, they would be happy to tell someone about it. In terms of lessons learnt the consultation work identified that there was a lack of initial awareness about the service in general. Some vulnerable adults do not know about who to contact with a concern, and there was some dissatisfaction with the information received in the initial stages of the referral. Most carers felt supported although it was not clear at times what the role of the POVA team had been, who else had been involved and some carers/relatives were not asked what they felt should happen as a result of the referral.</p>
<p>Consulted with Area Adult Protection Committee (AAPC) members regarding the effectiveness of the committee.</p>	<p>This consultation work did not fully progress as AAPC was replaced with a new Cardiff and Vale Safeguarding Adults Board. Some work was undertaken to identify what works well and areas of improvement. These findings were then fed into the development of the new regional board.</p>
<p>We have started to consult with children involved in the Child Protection service.</p>	<p>This consultation started in October and was widened to incorporate Children in Need (CIN) and Looked After Children (LAC) and use of Advocacy services. We have received 10 responses so far.</p> <p>All respondents are aware of the reasons for having a Social Worker. All respondents had experienced changes of Social Worker, but this had been explained to them and appropriate introductions made. Some did not feel listened to and involved in their care.</p> <p>A smaller number of people had been involved with the National Youth Advocacy Service (NYAS) (40%), and half had</p>

	previously heard of this advocacy service. Young people provided suggestions about what would improve their contact with Social Services; this included listening more, and having more opportunities for interaction.
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Consultation planned 2015-16	Purpose of the consultation
Protection of Vulnerable Adults (POVA) consultation	To explore views of the support provided by the POVA team. The knowledge of the team's work and the roles of other professionals will also be explored. Both carers and service users will be consulted.
LAC consultation	A group is to be set up to form a reference group for those who have had experience of being involved with Social Services and are willing to be consulted for their views.
Fostering consultation	Foster carers and the young people placed with them will be contacted to ascertain their views about the support they receive from the Fostering Service (Placements and Permanency Team). One questionnaire will be sent to foster carers regarding the following: <ul style="list-style-type: none"> • Assessment and Approval • Matching • Training • Support • Equal Opportunities For the young people, the questionnaire will include: <ul style="list-style-type: none"> • Information • Support • Your Views • Equal Opportunities
Adult Placement Service	Service users, their families/carers, hosts, and case managers will be contacted to ascertain their views about the support they receive from the Adult Placement Service (Shared Lives). This will then be shared with the team to ensure improvements and good practice is shared.

Consultation planned 2015-16	Purpose of the consultation
Respite	Respite service users and carers will be contacted to ascertain views about the support they receive from the Respite Service. We hope to gain insight into their experiences regarding information provision, support with daily living and activities provided by the service. In addition, we will ask carers and relatives about the support the service user themselves receive from their perspective.
Residential Care Service	Service users and carers will be contacted to ascertain views about the support they receive from the Residential Care Service. We hope to gain insight into their experiences regarding information provision, support with daily living and activities provided by the service. In addition we will ask carers and relatives about the support the service users themselves receive from their perspective.
Adoption Services	Four groups of service users are going to be consulted: approved adopters, those who have received post adoption support, step parent adopters and those who have requested access to birth records. Interviews will also be carried out to obtain personal experiences of the adoption process.
Commissioning Services	The specific area of commissioning to be explored will be considered during the Autumn of 2015. Service users will be contacted to find out their views of the support they receive from one of the commissioned service providers.

Key Service Issues- Collaboration

In line with our corporate priorities and Welsh Government requirements, we continue to explore and promote opportunities for working collaboratively locally and regionally in order to deliver improved services for customers and deliver savings. The work done to improve collaboration and deliver specific programmes is overseen by the Social Services Collaborative Programme Management Board attended by the Leader, Cabinet Members, the Managing Director and representatives from the Directorate and from the corporate centre. Our contribution to the collaboration agenda is evidenced in our participation in the following projects.

Collaboration undertaken 2014-15	Outcome of the collaboration
<p>Improving access to health and social care services by further developing more integrated first contact and access to services as part of the RCF and ICF.</p>	<p>This project has involved remodelling access to health and social care services in the Customer Contact Centre in partnership with Cardiff and Vale Health Board. New specialist posts have been established to enable effective triaging of calls on behalf of the Health Board and the Council. There are now integrated call handling processes in place between health and social care staff and the Call Centre now receives joint health, social care and third sector screening/allocation referrals. As a result of this service remodelling, more people have been redirected to the right service. There is a more effective and co-ordinated care system in place across Community Health and Social Care. The speed of response to social care referrals has increased significantly with the response time for standard referrals reduced by 75% and for priority referrals by 50%.</p>
<p>Development of single assessment template for children as part of the SWIFT consortium.</p>	<p>The Council is part of a Consortium, consisting of 6 local authorities in the South East Wales area which use the same Social Care Client Recording System. Through the Consortium, we have developed the system to support working practices and in managing the interface with the software supplier. One of the key drivers of this work has been to improve the templates we use so that they are more family-friendly and support the engagement of service users. This remains the intention. However, the focus of attention has shifted currently to preparation work required for implementation of the new Social Services and Wellbeing (Wales) Act 2014. This work will include considering an appropriate assessment framework to support implementation of the Act.</p>

Collaboration undertaken 2014-15	Outcome of the collaboration
<p>Development and review of regional policies regarding the protection of adults and children and building and developing the integrated Local Safeguarding Children's Board (LSCB) model. Establishment of joint Adult Safeguarding Board across the Vale and Cardiff.</p>	<p>A Business Manager has been appointed to the Cardiff and Vale Safeguarding Children's Board. The new LSCB website has been launched. Sub-groups have now been merged to improve our approach to business planning, audit, communication and child practice reviews. Merged policies and procedures have been drafted and are in the process of ratification.</p> <p>A joint Adult Safeguarding Board has been established for the Vale and Cardiff. Sub-groups have been established to take forward the work of the Board. This is a key requirement of the new Social Services and Wellbeing (Wales) Act 2014 that has been achieved in advance of the legislation coming into effect.</p> <p>Cardiff and Vale Safeguarding Adults Board (SAB) is committed to working with its partner organisations in order to protect vulnerable adults from abuse and neglect and to promote their health and wellbeing.</p>
<p>Establishment of a joint commissioning team across the Vale, Cardiff Council and the UHB.</p>	<p>There are complementary commissioning strategies in place or being produced in partnership with the Health Board. For example, we now have in place a Joint Day Opportunities Commissioning Strategy developed in partnership with the Cardiff Council.</p>
<p>National procurement of the new electronic case management system for Social Care and Community Health.</p>	<p>A tendering exercise has recently been completed to identify a supplier for a new integrated Social Care and Community Health System for Wales. The Vale is an interested party in this tender process.</p>
<p>Establishment of Community Resource Teams as part of the Regional Collaboration Fund grant.</p>	<p>This project has established 3 Community Resource Teams (CRTs), 2 in Cardiff (Whitchurch and Llanrumney) and 1 in the Vale of Glamorgan (Barry Hospital) bringing together University Health Board (UHB) and Local Authority staff to deliver a more joined-up service, improving response times and reablement capacity. Following successful co-location of Health and Social Care staff, work is now underway to fully integrate processes to deliver an integrated care pathway for service users. Mobile devices have helped with home care reablement to improve</p>

Collaboration undertaken 2014-15	Outcome of the collaboration
	<p>efficiency of the service by enabling carers to receive information via their mobiles. Third Sector partners are also working with the CRTs to provide additional resources to accelerate the reablement of service users. In the Vale, referrals are now managed via the Contact Centre.</p>
<p>Development and implementation of streamlined integrated assessments as part of the Regional Collaboration Fund grant.</p>	<p>This collaborative project has delivered a streamlined integrated assessment process which will be used across all three partner organisations (Vale of Glamorgan and Cardiff Councils and the Cardiff and Vale Health Board). Key achievements, both local authorities have developed a joint (integrated) Inpatient Assessment Form in conjunction with the Health Board that is currently at the consultation stages. There is constant ongoing improvement and development of assessment forms along with the development of supporting guidance and the development of Inpatient Assessment Review forms to make reviews easier. A Change Panel has been established between Cardiff and the Vale to ensure there is consistency in the development and improvements made by both local authorities.</p>
<p>Delivery of an enhanced Occupational Therapy service supported by the Regional Collaboration Fund grant.</p>	<p>The project has increased current Occupational Therapy and equipment capacity by reviewing current high cost packages/double handling cases, so that the right equipment and reablement opportunities are provided. This collaborative approach has also involved trialling a new model of working to reduce the duplication of visits by Occupational Therapists (OTs) undertaking initial assessments which has also helped to deliver savings and improved the client experience as fewer assessments are carried out by different specialists. In terms of other achievements, the additional review by OTs enables them to work collaboratively with case managers to undertake timely reviews of people with physical disability where the results have been positive in terms of improving safeguarding through the OT taking an 'alerter' role to highlight any potential /actual problems. There has been improved communication and provision of information to service users, so clients are more aware of how the process works and what to expect. As a result of this project</p>

Collaboration undertaken 2014-15	Outcome of the collaboration
	there is also closer working with physiotherapists to support service users.
Delivery of enhanced Learning Disability Services supported via the Regional Collaboration Fund grant.	This collaborative project provides a resource to review care packages for people with learning disabilities and develop an integrated Learning Disability Day Opportunities Strategy across Cardiff and the Vale. The project has successfully appointed a Day Opportunities Project Manager which has increased the pace of the day opportunities review in both the Vale and Cardiff. As part of this review opportunities are being explored with the Third Sector in order to develop social enterprise models. Significant savings have also been identified through the review of Third Sector day provision.
Provision of a fast track accommodation solutions team to work closely with Health and Social Care Officers in developing appropriate housing responses for older people at the point of Hospital discharge and admission.(ICF funded)	This collaboration has resulted in a dedicated Occupational Therapist and Accommodation solutions Team Co-ordinator being appointed. The agreement has been formalised with Cardiff Council for officers to work across the region as appropriate to find the best solution for fast track discharge for Hospital.
Reconfiguration of existing accommodation to provide specialist units that will assist older people to maintain and regain their independence in their own homes. This also includes the provision of extra care solutions in the form of a step down accommodation to enable earlier discharge from Hospital. (ICF funded)	These units are designed for both longer-term accommodation and shorter term (step up step down facilities) whilst a person's own home is being adapted. During 2014, 8 of the 10 units were completed. The upgrading and refurbishment of the units better meet the needs of older people enabling them to retain their independence for longer. Work has been undertaken on the communal sections of the scheme such as the laundry room, IT room, day room, communal kitchen etc. Work has also been undertaken on the 2 rehabilitation units providing a step down facility for older people making the transition from Hospital to home. Building work has been completed on one unit, and handed over to Hafod and the step down unit is now operational and providing care to service users and the domiciliary care provider is fully operational.
Utilising the Third Sector to support the remodelling of adult	A tendering process has been completed and contacts have

Collaboration undertaken 2014-15	Outcome of the collaboration
social care and provide support and advice to individuals to make informed choices. (ICF funded)	been awarded to Care and Repair and Age Connects for the provision of services. A performance matrix has been agreed with these Third Sector providers to ensure that they meet their contractual obligations. The contract commenced on the 1 st October 2014.
Worked in partnership with an external care provider to review and make recommendations on whether there are opportunities for that sector to provide reablement services. (ICF funded)	The tender process to procure a suitable external partner has been completed and contract has been awarded to the external domiciliary care provider, Care Watch. Training of carers in reablement packages of care has been completed and work has been undertaken by Care Watch with services on reablement packages of care. The effectiveness of this new model of working will be closely monitored and if proven to be effective will be rolled out more widely. This model needs to be fully embedded before any savings/cost avoidance can be measured.
Exploring new Telecare services/technologies to enable elderly and vulnerable people to live independently in their own home and reduce the costs associated with care packages (ICF funded).	Initial client analysis work has been undertaken to identify and clarify areas of greatest demand. VEGA watches have been purchased to assist services users (particularly those with dementia) to remain safe and secure using technology to monitor and track a service user's location and wellbeing.
A review of high cost packages of care across older people's to determine whether they are appropriate and if there are alternative approaches that are more cost effective and will maximise an individual's independence.(ICF funded)	We have reviewed 30 high cost/complex packages of care across all older people's domiciliary care commitments and implemented the changes that have been recommended to packages of care. This has resulted in both better outcomes for the service user as well as cost savings. This approach has enabled us to pilot a new model of working that will now be embedded through the locality restructure within Social Services.
Transformation of way in which dementia care services are delivered that includes overseeing the implementation of the 3 year Dementia Plan and support the development of the Dementia Supportive Community pilot. (ICF funded)	A Resource Centre Manager post has been appointed. Linkages have been made with the SPIDER project for the Vale of Glamorgan to become a sub-partner and other linkages have been made with training providers to up skill staff in order to develop models of care for the future. The Dementia Supportive Communities pilot has been launched, but further work will need to be undertaken to embed it fully.

Collaboration undertaken 2014-15	Outcome of the collaboration
Focus on addressing quality assurance issues in the delivery of social services by looking at best practice examples across the sector and offering support to organisations. (ICF funded)	A literature review of best practice has been undertaken and work is underway with external providers to share/establish best practice and the development of a Quality Assurance Framework/Toolkit. The Head of Business Management and Innovation has worked closely with Domiciliary Care and Care Home providers to seek views on how we can best support providers.

Collaboration planned 2015-16	Purpose of the collaboration
Improving access to health and social care services by further developing more integrated first contact and access services.	To reduce the number of referrals routes to Vale Community Health and Adult Social Care services and to ensure service users are directed to the right service first time for Health, Council or Third Sector provision.
Continued enhancement of Community Resource Teams as part of the Regional Collaboration Fund grant.	To deliver a more joined-up approach to service delivery, improving response times and reablement capacity so service users can live independently.
Continued delivery of an enhanced Occupational Therapy service supported by the Regional Collaboration Fund grant.	To enable service users and their carers to maximise their independence as well as make savings on the cost of the packages of care.
Continued delivery of enhanced Learning Disability Services supported via the Regional Collaboration Fund grant.	To ensure that the service is cost effective and appropriate packages of care can be provided via collaboration. To deliver more meaningful daytime opportunities and outcomes for people with a learning disability across Cardiff and the Vale.
Implementation of the Social Services Wellbeing (Wales) Act regionally with our key partners.	To work together cohesively to plan for the implementation of the Act when it comes into force in April 2016.
Delivery of a Regional Adoptive Collaborative with Cardiff, Merthyr and RCT. This collaboration will be part of the development of a National Adoption Service for Wales and will be hosted by the Vale of Glamorgan.	To improve services for adopted children and their families, including the availability of adopters and enhancement of the adoption support.
Further integration of social care and health services across the Cardiff and Vale region, based upon work commissioned by the Integrating Health and Social Care Programme Board and the LSCB.	The review will develop options for how we can intervene to reduce demand for acute services and deliver fully integrated services, providing the basis for a prioritised delivery plan for integration over the next 3-5 years.

Key Service Issues- Risks

The continued pace and scale of the changes demanded of public sector organisations in recent years pose a significant risk to both the Council and the Directorate in achieving its key priorities. In response the Council's Corporate Risk Register has identified the key challenges which may affect our ability to achieve these priorities. Through the Corporate Risk Management Group, we ensure that appropriate mechanisms are in place to reduce, eliminate or manage these risks.

It is clear that we will have to live with budgetary pressures for some time and, so in order to continue to provide services to our customers at an acceptable standard; we are considering alternative models of service delivery. At the same time, we continue to manage a reduced workforce in some areas and the consequent impact of the loss of experience and knowledge within the directorate.

Highlighted below are our key risks as a Directorate over the next four years. In identifying these risks we have also shown how we plan to manage them.

Scoring service risks	
Likelihood score	Refers to how likely it is that the risk will occur, that is, the probability of the risk happening. The scoring ranges between 1 and 4, with 1 being very unlikely, 2 - possible, 3 – probable and 4 being almost certain to happen or has already happened.
Impact score	Refers to what the impact would be if the risk occurred. Again the scoring ranges between 1 and 4, with 1 being low, 2 – medium, 3 – high and 4 being catastrophic. Impact would include things such as financial costs, public wellbeing, environmental/ social impact, damage to reputation, health and safety etc.

Links to service outcome/objective	Risk	Likelihood score	Impact score	How will it be managed?
Relevant to all Service Objectives.	Service users are not screened for Social Care and Health services, so experience poor outcomes.	2	2	Ensure effective oversight of the Contact Centre in the delivery of adult social care first contacts. Work with the Contact Centre in managing the Community Hub for accessing Health and Social Care Services. We have in place robust screening processes/assessments in place for children and young people administered via the Intake and Assessment Team, but need to work with other agencies to decide how best to operate across organisational and professional boundaries.
Service Objective 1	Service users can not access the services swiftly and their needs are not met or increase.	3	3	Maintain or streamline appropriate additional routes in to the service. Increased monitoring of first contact performance. More integration of processes, services, systems with the Health Board as appropriate.
Service Objective 1	Insufficient operational staff capacity to ensure timely assessments are completed.	3	3	Ensure work is prioritised and review systems are in place. For Children and Young People Services all contacts are received the by Intake and Assessment Team. A dedicated duty function is in place. Effective screening of assessments for Adult Services

Links to service outcome/objective	Risk	Likelihood score	Impact score	How will it be managed?
				is undertaken increasingly by the Contact Centre for both health and social care calls via an integrated assessment process. Staff are spending less time completing paperwork as a result of improved mobile working.
Service Objective 2	The Council is unable to meet statutory responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	3	4	Through maintaining appropriate staffing levels and expertise, alongside prioritisation of work and effective reviews of services and efficiencies achieved by public services working together more closely.
Relevant to all Service Objectives. Corporate Risk CR 12:	Our Corporate Safeguarding procedures are insufficient, not followed or are ineffective.	1	3	We have put in place robust safeguarding mechanisms, processes and procedures that include the Safer Recruitment Policy, Referral of Safeguarding Concerns procedure, staff supervision policy, Provider Performance Protocol. We follow the All Wales Procedures and associated protocols that are embedded within Social Services. There is mandatory safeguarding training in place for relevant staff. We have developed a Corporate Safeguarding Group and have in place a regional Local Safeguarding Children's Board and Adult Safeguarding Board.

Links to service outcome/objective	Risk	Likelihood score	Impact score	How will it be managed?
Service Objective 2	Unauthorised deprivation of liberty.	4	3	The Deprivation of Liberty Action Plan will be implemented in full. The Council has trained 20 Best Interest Assessors whose role it is to undertake best interest assessments on behalf of the council.
Service Objective 2	Other organisations are unable to meet their responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	3	4	Liaison with relevant organisations and sharing of good practice, Effective leadership of Safeguarding Boards for children and adults.
Service Objective 3	Insufficient funds to meet rising demand for services.	4	3	Expenditure is closely managed through the budget programme board. We are generating better and more timely monitoring information and forecasting. Service delivery models are being reshaped.
Service Objective 3	Reduction in service availability because of increasing demand, higher expectations and changes to eligibility criteria.	4	4	Effective management of service user expectations. Strict application of eligibility criteria. Reviewing and remodelling current service provision in favour of wellbeing, preventative support wherever possible and developing opportunities for integration and collaboration. Improve support available to carers within the community to enable them to take on further responsibilities.

Links to service outcome/objective	Risk	Likelihood score	Impact score	How will it be managed?
All Service Objectives	Local government reorganisation becomes a distraction to delivery of services	1	3	Effective communication with staff, partners/stakeholders and service users. In terms of Adult Services this will involve continuing to ensure a focus remains on integrating services with Cardiff and Vale University Health Board. The emphasis will be on delivering service strategies for individual service user groups via a range of in-house programme management and partnership working across the relevant footprint.
All Service Objectives	Continued reduction and regionalisation of grant funding.	4	4	Risk highlighted corporately as a cost pressure. Exit strategies are in place. We have a good track record in making effective use of grant funding and a robust approach to ensuring that the Vale receives a proper allocation of the resources available.
All Service Objectives	Inability to implement requirements of the Social Services and Wellbeing (Wales) Act 2014	3	4	The reshaping services agenda will take into account the requirements of the Act. Continued liaison with Welsh Government through the consultation process for new Regulations and Codes of Practice, to demonstrate the resources implications and to ameliorate the potential impact. Production of an

Links to service outcome/objective	Risk	Likelihood score	Impact score	How will it be managed?
				implementation plan to address any assessed shortfalls.
All Service Objectives.	Closure/failure of our commissioned providers.	2	4	Provide support to promote Social Enterprises and co-operative. Independent sector providers will have access to additional support and advice. Close monitoring of commissioned services is undertaken via effective quality assurance. The Provider Performance Protocol sets out performance standards /expectations and enables us to deal with any poor performance issues in a timely manner. The Quality Assurance Group is responsible for monitoring and identifying any areas of concern/issues among providers as they emerge.
Service Objective 1/2	Transfer of Mental Health Services to Llandough Hospital- Financial impact of aftercare responsibilities under section 117 of the Mental Health Act.	3	3	We are currently seeking legal advice to assess the implications. There will be close liaison with the Health Board to identify the numbers of clients affected.

Our Contribution to Corporate Plan Priorities 2015-19

Our contribution to the Corporate Plan priorities last year:

- We have provided young children and their families with a 'flying start' by improving information regarding suitable childcare places and activities which meet their particular needs (CYP/01). We effectively provide a 'full offer' of services to all eligible Flying Start families as part of the four service streams that includes an intensive health visiting service, free childcare places, parenting support, speech and language support and play provision. During 2013/14, Flying Start expanded into the Castleland area where contact was established with all eligible families. During 2013/14, 99.64% of children took up Flying Start Services. The most recent data shows that between September 2014 and December 2014 this take up was 100%. Take up of the childcare places has also been good with 87% of families taking up their childcare entitlement during 2013/14. Between September 2014 and December 2014, the take up figures for childcare places was 85%.
- We have promoted and increased opportunities for all children and young people including those who have a disability or undertake a caring role to engage in play, physical and cultural activities (CYP/02). We have pooled resources by utilising the Families First grant and the Carers Service funding to procure a Young Carers Project. The tender was awarded for offering additional 1-1 support as an enhancement to existing services. The Families First Disability strand also funds a range of opportunities for disabled children.
- The appointment of a dedicated Transitions Social Worker in the Child Health Team has enabled us to continue to improve multi-disciplinary transition support for young people moving into adulthood. (CYP/05).
- We worked with the third sector and other organisations to deliver information about services for children in need via the Family Information Service, the Council's Contact Centre and other communication channels (CYP/06) Collaboration on a joint resource directory has started. The Family Information Service is meeting standards as set out in 'Delivering Quality Information for Families Together' issued by Welsh Government in 2014. The Vale of Glamorgan Care Directory that provides signposting to local services for older people has been reviewed and updated ready for publication in early 2015. Work continues in order to develop an on-line directory of services in collaboration with North Wales Single Point of Access (SPOA) and SSIA, including an audit of existing directory services.
- We worked with the LSCB, the Council's Safeguarding Steering Group and schools to deliver our safeguarding responsibilities, obtain the views of children and implement protocols in respect of neglect and child sexual exploitation. (CYP09) by concluding the merger of the Cardiff and Vale LSCBs, ensuring that our statutory responsibilities in respect of the joint LSCB are delivered. An annual survey to obtain the views of children involved in the child protection process has been reported back via the LSCB and a dedicated Education Safeguarding Officer is ensuring that schools deliver their safeguarding responsibilities. The Corporate Safeguarding Group monitors safeguarding compliance across the Council and areas of focus have included safer recruitment and safeguarding training. We have also reviewed the Neglect Protocol that has been ratified by the Cardiff and Vale LSCB.
- We have embarked on tackling child poverty by working with families in need to raise their awareness of entitlements to welfare benefits and allowances as well as facilitated access to support services that help people get into employment and training (CL14). We have achieved this by taking the lead on the development of a Council-wide Poverty Strategy that has been

embedded within the Community Strategy. There are a range of support services for families in need such as referrals to the CAB service and a range of Families First projects that are targeted at early intervention and prevention services for children, young people and families. The FACT service (Families Achieving Change Together) is a key element of the Families First programme that has a strong focus on tackling issues associated with poverty. This service takes a 'Team around the Family' approach to providing tailored family support that meets their needs.

- We have increased the availability of reablement and rehabilitation services that help older people to prevent them from experiencing a crisis. [SS03] [HSCW/06] The remodelling of the CRT team has been completed which has resulted in increased number of people achieving full independence. This is currently approaching 70% of service users who enter the service.
- We have worked with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible, including people with dementia related illnesses (HSCW/07) The Regional Collaboration Fund has supported the tendering of Third Sector brokers as an alternative to statutory services. We have effectively engaged with carers groups and Third Sector organisations to consult on future service models and developments. The Council has endorsed the Dementia Strategy with the Health Board.
- Established integrated social care and health assessment and care management teams for all adult services in partnership with the Cardiff and Vale University Health Board (HSCW/08) These integrated models are in place for Mental Health, Older People's Mental Health and Learning Disability while locality services are now co-located.
- Worked with the Cardiff and Vale UHB to provide an increased range of community based health and social care services, including the development of Barry Hospital as a centre of excellence (HSCW/09) A variety of services have been enhanced at Barry Hospital such as successful co-location of health and social care staff as part of the Vale Community Resource Team.
- We have effectively worked with our partners to implement the Carers Information and Consultation Strategy 2012-15 (HSCW/10) A pilot initiative to provide carers with support in hospital settings has been extended to full time provision until the end of March 2015 at least. Strategy action plans have been reviewed and further developed for 2014/15 and 2015/16. The Carers Handbook is produced jointly under the Strategy and has been updated and reprinted. A leaflet has been drafted to signpost carers to help and support in relation to manual handling and a pictorial guide to manual handling equipment for carers and families. We have also developed a training algorithm and observation sheet for practitioners.
- We have placed a strong focus on preventing abuse by professionals working in social care settings and in the community by ensuring that the voice of the vulnerable adult is heard and staff witnessing abuse feel empowered to report their concerns (HSCW/11). We have accomplished this by ensuring all agencies are aware of the need to place the voice of the vulnerable adult at the centre of the process and putting in place clear mechanisms for reporting any concerns/issues such as the PRAAC sub-group where issues regarding the quality of commissioned care are discussed.
- We consult annually with vulnerable adults involved in formal protection arrangements (Protection of Vulnerable Adults) and use the information to bring about improvements (HSCW/12) The last consultation identified that most respondents felt supported through the process and that their views had been taken into account.

Our Service Self-Assessment

How are we doing?

How are we doing?

Performance Overview

Overall the directorate has contributed well to achieving our key corporate priorities outlined in the Corporate Plan 2013-17, Improvement Plan 2014-15 and Year 2 of the Outcome Agreement with Welsh Government:

- Overall, we have completed 70% of Service Plan actions, with a further 10% on track for a later completion date. Of 30 Service Plan actions, 21 are completed, 3 are on track and 6 have slipped. The three actions that are on track are due to be completed in March 2016. Of the 6 slipped actions, 4 have been carried forward to the 2015/16 Service Plan and 2 have been deleted.
- We have completed 86% of Corporate Plan priorities. Of the 14 Corporate Plan actions within the Service Plan, 12 are completed and 2 have slipped.
- 89% of our Improvement Objective actions have been completed. Of 9 Improvement Objective actions, 8 have been completed and 1 has slipped.
- There is currently only one area with the Welsh Government Outcome Agreement that is aligned to the Directorate; it relates to improving the lives of older people and the associated action is currently on track for completion. Against the 10 Outcome Agreement measures associated with this outcome, 8 have met or exceeded the target, 1 is within 10% of target, and 1 has missed the target by more than 10%. The indicator that has missed target by more than 10% relates to the rate per 1,000 population of over 65s who have had a UA assessment. This has been attributed to the reconfiguration of the service coupled with an increase in the population of over 65s. This indicator will be monitored during 2015-16.
- The Directorate's performance against all performance measures during 2014/15 is very good. Of the 78 performance measures, 59% (46) had either met or exceeded target, 22% (17) were within 10% of the target, 7% (5) of measures had missed target by more than 10%, and performance status was not applicable for 12% (10) of indicators.
- Our performance in relation to the national statutory indicator dataset is improving when compared with the rest of Wales. During 2013/14, of the 15 National Strategic /Public Accountability measures for the service area, 10 were in the top quartile, 4 were in the bottom middle (third) quartile and one indicator was in the bottom quartile. This was in relation to Delayed Transfers of Care; significant and sustained improvement has been made recently in this area of work. In line with corporate performance management arrangements the Directorate has identified a targeted approach to improving performance against those statutory indicators in the second, third and fourth quartiles.

What are we doing well?

- The CSSIW's Annual Inspection report was very positive regarding progress that has been made to date and reported that, 'The Council continues to provide strong leadership and planning in Social Services' and that the Council 'continues its lead in improving the breadth of regional working'.
- CSSIW highlighted that good progress has been made in relation to putting in place commissioning strategies for a range of service user groups. They specifically note that in relation to Adult Services, the regional commissioning hub has been identified as a good initiative that provides a 'good foundation for joined up commissioning in the future'. The Head of Adult Services is a joint post that is shared with the Health Board which CSSIW noted has some clear advantages for integrated commissioning. They also note that good progress has been made in relation to Children's services and report that the Council is meeting its obligations in many areas.
- The Director of Social Services Annual Report for 2013/14 (published October 2014), identified that 'performance in nearly all key areas has been maintained or improved despite increased demand for services'. The report also states that through its service transformation agenda and effective resource management the savings target for 2014/15 for over £2million was achieved and the service ended the year with a balanced budget.
- The report also noted that we have a 'sufficient and skilled workforce' that has remained relatively stable that has been supported by the development of a Social Services Workforce Plan. The implementation of a Team Manager Development Programme is also helping to ensure that current and future managers are equipped with the skills required to manage a modern social service.
- In October 2014, the Vale of Glamorgan Adult Community Mental Health Service was reviewed by CCSIW and highlighted areas of good service provision, strong leadership and a sound commitment to person centred and recovery focussed social care.
- Positive progress has been made in relation to supporting adults to live independently in their own home. The CSSIW report noted that there has been an increase in the number of individuals supported at home whilst reducing the numbers supported in a care home setting. The performance data shows there has been a marginal increase of 90.5% of clients (aged 18-64) supported in the community in 2013-14. The establishment of three Community Resource Teams as part of the Regional Collaboration Fund in partnership with Cardiff Council and the Health Board has enabled us to deliver a more joined up approach through the co-location of staff (at Barry Hospital), improved response times and increased our reablement capacity in the community. As a result of this co-location there has been an increase in the percentage of service users that have been supported back to independence. During 2013/14, of 256 service users who had completed their reablement package, nearly 70% were independent and a further 18% required a significantly reduced package of care in order to meet their ongoing needs. There are also high levels of satisfaction with the service, with 80% of service users reporting that they gained independence as a result of the support they received. The majority of service users were satisfied with their transfer of care from Hospital and reported that staff treated them with dignity and respect. During **quarter 2 (2014-15) over 80% of service users were helped back to independence without ongoing care services as a result of short term interventions compared with just over**

60% in the same period during 2013-14. We are also progressing a residential tender to create a new residential care facility in Barry.

- We have consolidated a number of our day services into one location at Hen Goleg. We have also collaborated with the Third Sector to initiate provision of day opportunities for learning disabilities and commenced the delivery of the Day Opportunities Strategy for Learning Disability for Cardiff and the Vale 2014-17. A new Resource Manager role in relation to dementia has been developed. This role is intended to support Rondel House and develop services that better enable us to respond to the growing demand to provide care for people with dementia and assist in developing of a dementia supportive community.
- The Director's Annual Report highlights that there is good evidence to show that we are screening more effectively potential service users and signposting people away from statutory services where possible. This has been supported by the progress that has been made by streamlining our assessments. For example, we have integrated our inpatient assessment form with the Health Board. This has had the positive effect of promoting a more joined-up approach between partners. By restructuring our social care and health community services. We have also improved access services using Contact OneVale (Contact Centre) as a co-ordination hub. This has resulted in a new Health and Social Care Triage system that has been launched to support signposting individuals to Third Sector support where applicable.
- The Children and Young People's Services Commissioning Strategy has supported our foster care recruitment as well as improved stability of our placements. For example, the percentage of children that experienced three or more placed during 2013/14 was 10.4% above the Wales average of 8.3% and ranked 15th in Wales. Since then there has been an improvement and the percentage of LAC experience three or more placements as at quarter 2 has decreased to just 3.89%.
- We have made significant progress with increasing in-house fostering availability with the development of a Foster Carer Recruitment Strategy and the appointment of a Social Worker as a recruitment officer whose remit it is to recruit carers to provide further respite services, placements for sibling groups and placements for children with complex needs. The South East Fostering Collaborative has been identified as a model of good practice that undertakes a marketing and recruitment role and regional procurement of high cost placements. Since adopting this new approach the Council has met its target of recruiting 8 new foster carers during 2013/14, which has resulted in better outcomes for children and young people. During quarter 2 of 2014/15, 6 new foster carers were approved and a further 3 assessments were underway. Against a target of 8 for the 2014/15 financial year, the Council is due to exceed this target by one additional foster carer. There has also been a reduction in the number of children who are now looked after away from home from 59 out of County placements in April 2012 to 46 in January 2015. A CSSIW inspection of our fostering service in 2014, identified evidence of children and young people achieving 'very positive educational outcomes'. The inspection also noted that Foster Care handbook to be a good resource and that the development of an outcome-based foster placement agreement format has supported social workers to identify outcomes to be achieved.
- The CSSIW adoption inspection in 2014, identified that adopters were generally 'very positive' about their experience and that there are good links established with child care teams. The inspection report also noted that the service has developed rigorous quality assurance systems to improve response times to potential adopters. We have taken a lead role on the development of a collaborative adoption service, where we lead on behalf of four local authorities covering two Health Board boundaries.

- The CSSIW report highlights that our decision-making following referral is timely and that there continues to be reduction in the number of referrals. In 2013/14, Children and Young People Services have maintained good performance for initial decision making with 98.9% of referrals receiving a decision within one working day. This places the Vale 10th across Wales and above the national average of 96.3%.
- In 2013/14, 86.6% of initial assessments were completed within 7 days. This places the Vale 8th across Wales and above the national average of 71.9%. 14% of initial assessments took an average of 8 days or more which is the fourth lowest across Wales. It is also lower than the national average of 19%.
- In 2013/14, 91.6% of core assessments were completed within 35 days. This places the Vale in the upper quartile performance and above the Wales average of 81.2%. 55% of core assessments took an average of 36 days or more to complete, which is marginally below the Wales average of 58%.
- 98% of child protection conferences held during 2013/14 were held within 15 days of strategy discussion. The Vale is placed in the upper quartile and above the Wales average of 89.9%.
- Safeguarding vulnerable children and young people and adults remains a key corporate priority for the service. The establishment of a Corporate Safeguarding Group has also ensured that safeguarding is a priority for all service areas across the Council and that the Central Safeguarding Unit ensures that learning and experience is being transferred between the child and adult protection processes.
- The CSSIW report on safeguarding and care planning recognises that our Corporate Parenting arrangements are well established and have directly influenced outcomes for LAC and that the authority has effective mechanisms in place to share information with our partner agencies to support the joint planning of LAC. The same report also highlighted that child protection processes were being used appropriately to manage risk and good quality assurance processes were in place. During 2013/14 there has been a decrease in the number of children on the Child Protection Register. For example, the most recent data for quarter 2 shows there has been reduction from 108 in 2013/14 to 89 in the same quarter for 2014/15.
- The CSSIW report on safeguarding and care planning recognised the improvements that have been made in relation to residential placements that have been commissioned that have enabled young people to return or remain in their communities.
- We have consistently performed well in relation to the completion of carers' assessments and we have continued to be ranked first in Wales for our performance. During 2013/14, 100% of carers were offered an assessment/review of their needs. 100% of young carers known to Social Services were assessed.
- The Family Information Service continues to provide a valued service and recently received positive verbal feedback following an audit visit where the assessor commented on how we are meeting our statutory requirements.
- The Director's Annual Report identified how the relocation of the Children and Young Peoples Service to the Docks Office has provided service users and staff with improved reception facilities and working conditions.
- The HM Inspectorate of Probation undertook a Short Quality Screening (SQS) assessment during December 2013. The report identified that the Youth Offending Service (YOS) in the Vale presented a very positive picture in terms of its performance and service delivery compared with a previous assessment undertaken in 2010 where there were a number of areas of improvement

identified. The SQS report summarised that 'substantial progress has been made in the quality of assessments, plans and reviews being undertaken by practitioners. They also recognised the commitment of staff in delivering a 'high quality service' and in general, felt that children and young people were well served by the quality of reports, plans and assessments provided by the YOS.

- In terms of Adult Services, CSSIW highlight the need to decrease the number of Delayed Transfers of Care (DTC). Despite this, the first half of 2014/15 has seen DTC rates halved when compared with 2013/14. At the end of quarter 2, the rate of DTC per 1,000 population was 2.58 compared with 7.35 for end of year 2013/14. The projected end of year performance for 2014/15 is 4.58. The CSSIW's commissioning review also found there was good evidence of us working in partnership with the Health Board to reduce DTC through ensuring appropriate access to services and noted the Integrated Discharge Service as innovative.

Improvement Areas:

- The CSSIW report balanced its evaluation with identifying some areas of improvement. The report identified the need to evaluate and improve arrangements for reviewing care plans for adult service users. The percentage of adult clients whose care plans were reviewed declined from 87.8% in 2012/13 to 78.3% in 2013/14 and was ranked 16th in Wales.
- CSSIW indicated that meeting both the health and education needs of LAC continues to be challenge. Despite the percentage of statutory health assessments completed for LAC improving to 66.5%, it still remains lower than the national average of 81%.
- Although CSSIW commended our joined up working with the Health Board, they identified the need to consider ways in which the therapeutic needs of looked after children and care leavers can be more effectively and efficiently met with particular reference to Child and Adolescent Mental Health.
- The report also highlighted the need to strengthen the working relationship between Social Services and Education. Performance has remained low in relation school attendance for looked after children in secondary schools, declining to 87.6%. CSSIW also noted that the completion of Personal Education Plans (PEPs) had also declined from 75.8% to 40% in 2013/14. With the implementation of new arrangements since January 2014, this figure has since improved and latest figures for quarter 3 of 2014/15 show that 97% of PEPs were completed within the required 20 days.
- In terms of stability of placements CSSIW noted that last year's performance for 2013/14 of 10.4% has remained below the national average of 8.3% (in performance terms). A higher percentage indicates worse performance. Despite this, the latest figures show progress has been made to increase the stability of placements, as for quarter 3 2014/15 the figure had reduced to 6.18%. Figures on the percentage of children experiencing one of more changes in school has improved from 21.7% in 2012/13 to 16.4% in 2013/14. The report also identifies the need to further improve the percentage of young people formerly looked after who are engaged in education, training or employment. Figures show a decrease from 55.6% in 2012/13 to 44.4% 2013/14. Performance since has shown some improvement, the quarter 3 figures for 2014/15 show there has been an increase in the percentage of formerly looked after children that are no longer Not in Employment Education or Training (NEET) to 66.7% (for that cohort).
- The CSSIW report on safeguarding and care planning identified the need to improve the consistency of core assessments and

the need for care plans to be more outcome-focussed.

- Although the CSSIW inspection of adoption services was very positive, it did identify the need to improve information contained in chronologies in the Child Assessment Records for Adoption (CARA) documents.
- Increasingly service users are encouraged to share their views about their experiences of service delivery to support a service review and redesign. The Learning Disability Commissioning Strategy and Day Opportunities Strategy included significant service user engagement. The development of the Learning Disability Day Opportunities Policy was informed by service users following a number of taster sessions and consultations to identify areas for further development. However, the Director's Annual Report identifies that there is still more to be done to engage with service users more consistently across all groups.
- Despite a very positive, SQS Report by the HM Inspectorate of Probation, they did highlight the need for the YOS to further improve the quality of practice by ensuring that any diversity issues are integrated into assessments and plans.
- The Wales Audit Office's review of Safeguarding arrangements concluded that our arrangements are 'mostly adequate' in relation to governance, accountability, monitoring, evaluation and management arrangements, but identified some further improvements could be made. These improvements include the need for a localised Corporate Safeguarding Policy, to ensure that the role/responsibilities of the Local Authority Designated Officer are clarified across the Council and to ensure all Elected Members and staff who are in contact with children regularly receive training on safeguarding and child protection issues.

What have we achieved?

Service Outcome/Objective	What did we do in 2014-15?	What outcomes have been achieved as a result of these actions?
<p>Service Objectives 1 & 2 Action ref: SS/A008 (HSCW9) SS/A009 (HSCW6)</p>	<p>We have placed a greater focus on reshaping/remodelling services. For example, the establishment through collaborative working of Community Resource Teams has seen the successful co-location of Health and Social Care staff and the integration of processes and pathways for service users. As part of this work, the eligibility criteria for the Vale Community Resource Service has been extended to support hospital discharge and prevent hospital admissions and progress has been made in implementing the Integrated Hospital Discharge Service. We created a new joint reablement service with the NHS at Barry Hospital, moved the Woodlands Day Service to better premises in Hen Goleg, and finished building the Extra Care Housing facility in Barry.</p>	<p>A more integrated approach to hospital discharge has helped us to facilitate an improved response to winter pressures in hospitals. We have increased the proportion of older people who can remain in their own community and live independently. The co-location of the Community Resource Team has also helped to support this. Of 256 service users who have completed their reablement package, nearly 70% were independent and a further 18% required a significantly reduced package of care to meet their ongoing needs. Over 80% of people felt they had gained independence as a result of the support they received and were helped back to independence without ongoing care service through short term intervention.</p>
<p>Service Objective 2 Action Ref: SS/A051 SS/A052</p>	<p>Commissioned new placements for LAC in fostering and residential care.</p>	<p>As a result of the Foster Carer Recruitment Strategy a Social Worker post is now dedicated to recruitment, training and support and we have we have invested our resources in more pre-approval foster care training, additional assessment capacity and a successful foster carer marketing campaign.</p> <p>We met our target of recruiting 8 new foster carers during 2013/14, which has resulted in better outcomes for children and young people. During quarter 2 2014/15, 6 new foster carers were approved and a further 3 assessments progressing.</p>
<p>Service Objective 1 Action Ref: SS/A002 (CYP1)</p>	<p>We have continued to tackle child poverty through a range of family support initiatives such as raising awareness of entitlements to welfare benefits and</p>	<p>We have provided support to a larger number of families through expansion of the Flying Start programme which now supports an additional 93</p>

Service Outcome/Objective	What did we do in 2014-15?	What outcomes have been achieved as a result of these actions?
SS/A007 (HSCW3)	allowances and to facilitate access to services. Grant programmes like the Families Achieving Change Together team has supported children and young people to remain living with their family networks. We have further expanded the Flying Start programme to eligible children.	children in the Gibbonsdown 4 area (new children across Flying Start as a whole for 2014/15 so far is 378) to access family support in the form of health visiting, childcare, parenting programmes and language and play support. The expansion also saw our first partnership arrangement of Flying Start childcare provided within a School setting (Holton Road). During 2014/15, the FACT team have worked with 300 families which has minimised the need for higher levels of intervention.
Service Objective 1	Relocation of Children and Young People's Services to the Dock's Offices.	This has had the effect of improving the overall experience for service users and staff in terms of better reception facilities and an improved working environment.
Service Objective 1	Worked in partnership with Cardiff and Vale Health Board to integrate social care and health assessments and care management team have been established for most Adult Services. Good progress has also been made on developing a Joint Communications Hub with Cardiff and Vale Health Board that plays a key role in fully integrating locality social care, housing and health teams/services.	Improved service integration in adult services is providing better experiences for service users who have both social care and health needs through reducing duplication and streamlining assessments. The average number of days between initial enquiry and completion of a care plan has reduced to 38.4 days during quarter 3 of 2014/15 compared to 40.89 days of the previous year during the same period (quarter 3).
Service Objective 2	A strategic vision in respect of day opportunities has been developed for Learning Disability Services. Working collaboratively within Cardiff we are developing a model of provision that is centred on meeting the specific assessed needs of individuals rather than building-based provision. This enables us to ensure service users are supported in accommodation effectively and can make full use of Telecare equipment to live more independently.	A Day Opportunities Manager has been appointed, which has helped to accelerate the pace of the joint review of services in both Cardiff and the Vale. Significant savings have been identified through the review of independent and Third Sector provision. As a result of this project, in the Vale over £60,000 of savings have been delivered through the use of assistive technologies in supported accommodation and over £50,000 savings

Service Outcome/Objective	What did we do in 2014-15?	What outcomes have been achieved as a result of these actions?
		identified in residential spend and £15,000 in domiciliary spend to date.
Service Objective 2	Additional resources have been focused on enhancing our Occupational Therapy Services using a new model of working for the therapists to undertake initial assessments and an increased focus on reviewing high cost packages.	This project has seen the delivery of savings alongside improved outcomes for service users with a more outcome focussed approach to packages of care. For example, of the 30 cases reviewed in the Vale during quarter 2 2014-15, there was a preventative (cost avoidance) weekly saving of £1,529.90 (indicative saving) with an approximate total saving up to 31 st March 2015 of £39,777.
Service Objective 2 Action Ref: SS/A045	Successfully concluded the merger of Cardiff and Vale LSCBs	The launch of a regional board has further enhanced partnership working and helped to further integrate and streamline services, processes and procedures.
Service Objective 3	We have increased the number of joint appointments. There are now three senior posts within adult services that are shared appointments with either Cardiff Council or Cardiff and Vale Health Boards.	Staff are being provided with joint training and single management. This shared approach has quickly broken down boundaries between organisations and supported the delivery of more co-ordinated care.

What do we plan to do?

Service Outcome/Objective	What do we plan to do in 2015-16?	How will we know if we're achieving our objective?
Service Objective 2 Corporate Plan Priority-CYP3 (2016/17)	Co-ordinate preventative and early intervention services for families in the greatest need including Flying Start, Families First and Intensive Family Support Services (2016/17)	Effective support and better wellbeing outcomes, alongside reduced demand for more intrusive forms of intervention. Increased uptake of Flying Start and Families First services/projects.
Service Objective 2 Corporate Plan Priority-CYP6 (2015/16)	Work with the Third Sector and other organisations to deliver information about services for children in need via the Council's Contact Centre and other communication channels (2015/16)	Robust and effective screening processes are in place for children and young people that operate effectively across organisational boundaries.
Service Objective 1 Corporate Plan Priority-HSCW 5 (2015/16)	Increase the take up of assistive technologies such as Telecare that enable older people and their carers to manage the impact and risks associated with chronic ill health.	Increased proportion of people can live independently and have a better quality of life, whilst ensuring effective use of resources/care packages. Greater numbers receiving Telecare services and increased availability of assistive technology.
Service Objective 2 Corporate Plan Priority-HSCW7 (carried forward 2013/14)	Work with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible, including people with dementia related illness (carried forward 2013/14)	Services are more focused on prevention and early intervention, providing service users with timely support and reducing the need for more intensive support. Reduced reliance on care home placements.
Service Objective 2 Corporate Plan Priority-HSCW13 (carried forward 2014/15)	Increase compliance with Deprivation of Liberty Safeguards by providers of social care services	An increase in the number of Best Interest Assessors to undertake DoLS assessments to meet the demand for urgent authorisations and the high priority standard authorisations. Care provided in domestic settings that constitutes a deprivation of liberty is appropriately authorised. Care arrangements are authorised within statutory timescales.
Service Objective 2 Corporate Plan Priority-H2 (Carried forward 2013/14)	Contribute to developing a wide range of options for older people requiring support and prepare a feasibility study for provision of an older people's village	There are an increased range of accommodation options available to older people. Higher proportions of older people live more independently and have a better quality of life.

What do we plan to do in 2016-19?

- 1. Further progress integrated arrangements with the Health Board.**
- 2. Explore alternative service models to better support the needs of clients more efficiently.**
- 3. Implementation of the Social Services Wellbeing (Wales) Act by April 2016**
- 4. Delivery of the reshaping services agenda.**
- 5. Implement the Budget Management Programme**
- 6. Prepare for the implementation of any other new legislation.**

Appendix 1 details all Service Plan actions aligned to outcomes and objectives to be delivered during 2015-16

Our Service Outcomes and Objectives

Having considered the self-assessment and the key issues and risks identified by the service we have agreed the following service outcomes and objectives:

Service Outcome 1: People in the Vale of Glamorgan are able to request support and receive help in a timely manner.

Objective 1 (SO1)

To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Corporate Plan Outcome/s:

Outcome 1: Citizens of the Vale of Glamorgan are fit, healthy and have equality of outcomes and through appropriate support and safeguards, the most vulnerable members of our community maximise their life opportunities.

Outcome 2: Children and young people are engaged and supported and take full advantage of life opportunities available to their local community and beyond.

Corporate Plan priorities undertaken as part of this objective:

**HSCW3
(2016/17)**

Work with partners to raise awareness, provide appropriate support and targeted action in line with the Tobacco Free Strategic Action Plan, the Substance Misuse Strategy and the Alcohol Strategy

**HSCW5
(2015/16)**

Increase the take up of assistive technologies such as Telecare that enable older people and their carers to manage the impact and risks associated with chronic ill health.

**CYP3
(2016/17)**

Co-ordinate preventative and early intervention services for families in the greatest need including Flying Start, Families First and Intensive Family Support Services.

**CYP6
(2015/16)**

Work with the Third Sector and other organisations to deliver information about services for children in need via the Council's Contact Centre and other communication channels.

Linked to Improvement Objective:

Awaiting confirmation.

Linked to Outcome Agreement Outcome:

None aligned to this objective

Service Outcome 2: The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion.

Objective 2: (SO2)

Through the Council working in co-ordination with other organisations to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation.

Corporate Plan Outcome:

Citizens of the Vale of Glamorgan are fit, healthy and have equality of outcomes and through appropriate support and safeguards, the most vulnerable members of our community maximise their life opportunities.

Corporate Plan priorities undertaken as part of this objective:

HSCW7

(Carried forward from 2013/14)

Work with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible, including people with dementia-related illness.

HSCW13

(Carried forward from 2014/15)

CYP6

(2015/16)

Increase compliance with Deprivation of Liberty Safeguards by providers of social care services.

Work with the Third and other organisations to deliver information about services for children in need via the Council's Contact Centre and other communication channels.

Contribute to the delivery of H2

(Carried forward from 2013/14)

Develop a wide range of options for older people requiring support and prepare a feasibility study for the provision of an older people's village.

Linked to Improvement Objective:

Awaiting confirmation.

Linked to Outcome Agreement Objective:

OA3: Improving the lives of older people.

Service Outcome 3: Social Service in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals.

Objective 3: (SO3)	To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.
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Corporate Plan Outcome:	Citizens of the Vale of Glamorgan are fit, healthy and have equality of outcomes and through appropriate support and safeguards, the most vulnerable members of our community maximise their life opportunities.
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Corporate Plan priorities undertaken as part of this objective:	None currently linked to this objective.
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Linked to Improvement Objective:	Awaiting confirmation.
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Linked to Outcome Agreement Outcome:	None aligned to this objective.
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Appendix 1 details all Service Plan actions that are aligned to the service outcomes and objectives to be delivered during 2015-16

Appendix 1: Social Services Action Plan

Service Outcome 1 **People in the Vale of Glamorgan are able to request support and receive help in a timely manner.**

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A056 (IO2)	Consolidate integrated social care and health assessment and care management teams for Learning Disability in partnership with the Cardiff and Vale University Health Board.	Working jointly with our partners in the NHS across adult services will ensure that our clients receive the maximum available support for both their health and social care requirements in the most cost-effective manner.	High	Amanda Phillips-OM Learning Disability Cardiff and the Vale Heads of Service	April 2015	March 2016	OM with support of Strategic Group. Support from Finance and Legal Services.
SS/A057	Continue to utilise and develop processes to ensure a full exchange of information between Child Health and the Disability Team and partner agencies is completed in a timely manner.	Smooth transition to adulthood for children with disabilities and their needs are met in the most cost-effective manner.	High	Alison MacDonald – OM CYPS Amanda Phillips-OM Learning Disability Cardiff and the Vale.	April 2015	March 2016	Operational Manager CYPS and Operational Manager for Learning Disability time.

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A058	Develop proposals for separating assessment and treatment specialities in relation to mental health.	Improved waiting times by working alongside specialist Recovery Teams offering evidence-based interventions to those with the most serious mental health illnesses.	Medium	Andrew Cole-OM Mental Health	April 2015	March 2016	Operational Manager Mental Health in Partnership with Cardiff and Vale University Health Board.
SS/A011 (CP/HSC W 5) (IO2)	Increase the take up of assistive technologies such as Telecare that enable older people and their carers to manage the impact and risks associated with chronic ill health. (CSSIW/AREF/IP5/2011)	More people enabled to remain within their own homes safely and with a better quality of life, alongside more effective use of resources. This is a long term action and is due for completion in 2015/2016	Medium	Lance Carver- HOS	April 2015	March 2016	Telecare Project lead and support from Corporate Communications.
SS/A059	Implement new service models as part of supporting individuals to access a wider range of inclusive opportunities including leisure, work and training.	Improved wellbeing and quality of life for people with a learning disability. This is a long term action and is due for completion in 2015/2016.	Medium	Lance Carver-HOS	April 2015	March 2016	Operational Manager through the delivery of the Day Opportunities Strategy.

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A001 (CYP6)	Work with the third sector and other organisations to deliver information about services for people in need via the Family Information Service, the Council's Contact Centre and other communication channels.	People in need have better information about the range of help and support available to them.	Medium	Carys Lord-HOS	April 2015	March 2016	Existing staff resources
SS/A010 (H2)	Develop a wide range of options for older people requiring support and prepare a feasibility study for the provision of an older people's village or similar community-wide model for meeting need for care and support.	Greater choice for older people, including more accommodation with care options.	Medium	Carys Lord-HOS	April 2015	March 2016	Existing staff resources

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A015	Examine how best to secure an increased range of service providers in social care, especially those who use a social entrepreneurial approach which engages communities and groups of service users or carers in the design and delivery of services, achieves wider training and employment outcomes, and promotes better social networks (perhaps using volunteers and peer support).	An increased number of social care social enterprises, where these can deliver service improvements and demonstrate a sound business case.	Medium	Carys Lord-HOS	April 2015	March 2016	Existing staff resources together with support from the Wales Co-operative Centre.
SS/A007 (CYP3)	Co-ordinate preventative and early intervention services for families in the greatest need including Flying Start, Families First and Intensive Family Support Services.	We effectively support and promote the wellbeing of clients, whilst reducing demand for more intensive forms of intervention.	High	Rachel Evans -HOS	April 2015	March 2016	Existing resources funded through grant streams.

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A060	In co-operation with partners establish an effective information, advice and assistance services in accordance with the requirements of the Social Services and Wellbeing (Wales) Act.	We effectively support and promote the wellbeing of clients	High	All HOS	March 2015	April 2016	To be determined following receipt of statutory regulations from the Welsh Government.
SS/A061	Embed the integrated locality health and social care model through clear processes which support the service user's journey through the care system.	Minimal number of transition points. Increased service user satisfaction levels, reduced duplication of information gathering, shared assessments and recording systems in place.	High	Suzanne Clifton – OM Locality Longer Term Care Service	April 2015	January 2016	Existing resources- HOS, OMs together with Cardiff and Vale University Health Board.
SS/ A004	Continue to improve multi-disciplinary transition support for young people moving into adulthood. (CP/CYP5)	Young people moving into adulthood have better life chances and more effective support.	High	Rachel Evans/ Lance Carver	March 2015	April 2016	Through existing resources

Service Outcome 2

The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion.

Objective 2: Through the Council working in co-ordination with other organisations to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation.

Ref	Action	Success criteria	High/Medium/ Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A062 HSCW5 (IO2)	Implement recommendations of the Task and Finish group for Telecare Services.	Increased take up of service and more effective use of resources.	Medium	Lance Carver-HOS	April 2015	March 2016	Head of Service and Project Lead Officer time.
SS/A021 (CP/HSC W 7) (IO2)	Continue to work with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible including people with dementia-related illness.	Services are more focused on prevention and early intervention, providing service users with timely support and reducing the need for more intensive support.	Medium	Carys Lord	April 2015	March 2016	Commissioning and Operational leads to review existing arrangements.

Service Outcome 2

The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion.

Objective 2: Through the Council working in co-ordination with other organisations to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A073 (CSSIW/A REF/IP5/2 014)	Work with Cardiff and Vale Health Board to fully implement the Integrated Discharge Policy	Improved independence of older people. Reduced delayed transfer of care rates.	Medium	Lance Carver- HOS	April 2015	March 2016	OM to lead review with Cardiff and Vale Health Board.
SS/A063	Implement Vale, Valleys and Cardiff Regional Adoptive Collaborative Model.	Services are provided by 3 co-located specialist team resulting in improved levels of service for users and the delivery of a more efficient and resilient service and an overall reduction in the Looked After Children population.	High	Rachel Evans-HOS	April 2015	March 2016	Officer Time and approximately £38K for one off implementation costs split across the 4 local authorities. £6k of implementation costs have been apportioned to the Vale.
SS/A064 HSCW13	Continue to develop awareness of the Mental Health Capacity Act and Deprivation of Liberty Safeguards amongst ACM and Health Teams as well as providers of care.	All providers to have an awareness of their duties under the MCA and DoLs to ensure relevant people are protected	High	Andrew Cole-OM Mental Health	April 2015	March 2016	OM for Mental Health.

Service Outcome 3

Social Service in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals.

Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A065	Consider the Day Opportunities Strategy and its application for service users with physical disabilities.	Increase in the types of opportunities offered to service users and their carers at times of the day and week where respite is most needed.	Medium	Suzanne Clifton- OM Locality, Longer Term Care Service	April 2015	March 2016	OM with Manager of Physical Disability service.
SS/A066 HSCW7 (IO2)	Develop a Dementia Resource Service for service users and their carers to provide better support and care for those whose lives are directly affected by dementia.	Service users/carers have improved satisfaction levels. Reduced number of referrals for commissioned packages of care on a crisis basis. Reduced reliance on respite facilities.	Medium	Suzanne Clifton-OM Locality, Longer Term Care Service	April 2015	March 2016	OM with Resource Service Manager.

Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A067	Contribute to the development of the Together for Mental Health Delivery Plan and promote services and interventions in all Council services that promote mental health wellbeing and reduce stigma.	Provide clear statement of Mental Health promotion to enable all Council departments to be clear about their obligations.	High	Andrew Cole-OM Mental Health	April 2015	March 2016	OM Mental Health officer time.
SS/A068	Prioritise completion of actions set out in the Social Services Budget Programme	The Social Services budget is managed effectively and services are delivered within available resources.	High	All Heads of Service	April 2015	March 2016	All HOS with the support of Finance and Human Resources Officer time.
SS/A039c CSSIW/A REF/IP2/2 011	Ensure that service specifications are derived from commissioning plans and that they are clear about the practice and quality standards expected.	Updated service specifications are in place, where necessary.	Medium	Carys Lord	April 2015	March 2016	Existing staff resources.

Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A055b (CSSIW/A REF/IP2/2 011) (IO2)	Consider the options for the delivery of long term care to address any shortfall in independent sector provision, particularly in relation to people with dementia related illnesses.	A greater range of services and increased choice within the resources available.	Medium	Carys Lord-HOS	April 2015	March 2016	Existing staff resources
SS/A069	Deliver actions identified in the implementation plan to meet the requirements of the Social Services Wellbeing (Wales) Act.	We are able to meet the duties/requirements of the Act.	High	All Heads of Service	April 2015	March 2016	1FTE Programme Manager Time. Utilise the Transforming Social Care Grant.
SS/A070	Implement key improvement areas as identified by relevant regulatory reports.	We can demonstrate progress and improved performance and outcomes in future regulatory reviews.	High	All Heads of Service	April 2015	March 2016	HOS time as required.

Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.

Ref	Action	Success criteria	High/Medium/Low priority	Officer responsible	Start date	Finish date	Resources required
SS/A071	To review the Children and Young People Services Commissioning Strategy 2013-18.	The Commissioning Strategy provides a robust approach to service planning and accurately reflects current and relevant priorities for service delivery.	High	Rachel Evans	April 2015	March 2016	Existing staff resources.
SS/A072	Contribute to implementing the LSCB Integration Programme as it relates to agreed priorities regarding children with disabilities, CAMHS provision and models for entry into Children and Young People Services.	The LSCB works effectively with its partners to ensure integrated approaches to service delivery.	High	Rachel Evans	April 2015	March 2016	Joint funding across Cardiff and Vale Councils and the UHB for a Programme Manager.
SS/ A043	Implement a brokerage hub for care home placements with Cardiff and Vale University Health Board (UHB) and Cardiff Council.	Families and professional staff will be able to find more easily what placements are available when making plans.	High	Carys Lord	April 2015	March 2016	Existing staff resources.

Appendix 2: Social Services Performance Indicators 2015/16

Please note that the direction of travel compares 2014/15 performance with the previous year's performance (2013/14) for all Local measures. National measures will be compared with the 2014/15 Welsh Average performance, available in August 2015.

Outcome 1: People in the Vale of Glamorgan are able to request support and receive help in a timely manner.

Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, are appropriately signposted to help and supported by proportionate assessments, care and support plans and services which meet their individual assessed needs.

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SS/M001	Percentage of service users visited within 20 working days of Financial Assessment for Residential/ Nursing care being requested.	95.00%	98.83%		95.00%	98.53%		↓	95.00%
SS/M002	Percentage of service users visited within 10 working days of Financial Assessment for non-residential care services being requested.	90.00%	90.81%		90.00%	97.18%		↑	95.00%
SCC/006	The percentage of referrals during the year on which a decision was made within 1 working day.	95.00%	98.88%	96.30%	98.00%	99.39%			99.00%
SS/M003a	The average number of working days between initial enquiry and completion of the care plan, for non-specialist assessments.	38 days	39.06 days		35 days	36.7 days		↑	35 days

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SS/M003b	The average number of working days between initial enquiry and completion of the care plan, for non-specialist assessments.	15 days	18.39 days		15 days	17.99 days		↑	15 days
SS/M004	The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by a worker.	80.00%	81.20%	78.90%	85.00%	81.24%		↑	85.00%
SCA/018a (PAM)	The percentage of carers of adult service users who were offered an assessment in their own right during the year.	100.00%	100.00%	85.80%	100.00%	100.00%			100.00%
SCA/018b	The percentage of carers of adult service users who had an assessment in their own right during the year.	100.00%	100.00%	39.40%	100.00%	100.00%			100.00%
SCA/018c	The percentage of carers of adult service users who were assessed during the year who were provided with a service.	100.00%	100.00%	63.80%	100.00%	100.00%			100.00%
SCC/001a	The percentage of first placements of looked	100.00%	100.00%	90.90%	100.00%	100.00%			100.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
(PAM)	after children during the year that began with a care plan in place.								
SCC/001b	For those children looked after whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence at the due date.	100.00%	96.67%	93.40%	100.00%	100.00%			100.00%
SCC/016	The percentage of reviews of children in need plans carried out in accordance with the statutory timetable.	80.00%	96.55%	78.80%	90.00%	90.12%			90.00%
SCC/030a (PAM)	The percentage of young carers known to Social Services who were assessed.	100.00%	100.00%	85.90%	100.00%	100.00%			100.00%
SCC/030b	The percentage of young carers known to Social Services who were provided with a service.	85.00%	92.00%	80.10%	89.00%	100.00%			95.00%
SCC/039	The percentage of health assessments for looked after children due in the year that have been undertaken.	70.00%	66.53%	81.00%	70.00%	63.31%			70.00%
SCC/041a (NSI)	The percentage of eligible, relevant and former relevant children that have pathway plans as required.	100.00%	100.00%	89.20%	100.00%	100.00%			100.00%
SCC/041b	The percentage of eligible, relevant and	100.00%	100.00%	85.60%	100.00%	100.00%			100.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
	former relevant children that have been allocated a personal adviser.								
SCC/042a	The percentage of initial assessments completed within 7 working days.	80.00%	86.61%	71.90%	85.00%	89.36%			85.00%
SCC/042b	The average time taken to complete initial assessments that took longer than 7 days.	15 days	13.99 days	19 days	15 days	13.97 days			15 days
SCC/043a	The percentage required core assessments completed within 35 working days.	80.00%	91.56%	81.20%	85.00%	94.23%			91.00%
SCC/043b	The average time taken to complete those required core assessments that took longer than 35 working days.	55 days	54.81 days	58 days	55 days	51.21 days			52 days
SCC/045 (PAM)	The percentage of reviews carried out in accordance with the statutory timescale.	95.00%	98.02%	89.60%	95.00%	96.44%			96.00%
SS/M009	Percentage of complaints dealt with within statutory timescales.	80.00%	85.71%		80.00%	90.91%		↑	90.00%
SCA/001 (IO2) (NSI)	The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	5.60	8.17	4.70	5.50	4.55			4.50

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SCC/010	The percentage of referrals that are re-referrals within 12 months.	35.00%	24.16%	22.20%	30.00%	16.24%			17.00%
SCC/007a	The percentage of referrals during the year that were allocated to a social worker for initial assessment.	25.00%	54.28%	75.50%	40.00%	56.59%			50.00%
SCC/007b	The percentage of referrals during the year that were allocated to someone other than a social worker for initial assessment.	15.00%	10.97%	7.90%	12.00%	12.36%			15.00%
SCC/007c	The percentage of referrals during the year that did not proceed to allocation for initial assessment.	70.00%	34.76%	16.70%	40.00%	30.85%			35.00%
SS/M014 (IO2)	The percentage reduction in home care hours required following a period of reablement from VCRS.					29.00%			30.00%
SS/M015a (IO2)	Current active telecare cases: TeleV		200.00		225.00	634.00		↑	650.00
SS/M015b (IO2)	Current active telecare cases: TeleV+		100.00		120.00	135.00		↑	650.00
SS/M016	The number of telecare installations completed	75.00	225.00		80.00	283.00		↑	283.00

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
(OA3)	within one calendar month.								
SS/M017 (OA3)	Number of people over 65 who are clients of Social Services who are provided with benefits advice.	125.00	1,942.00		135.00	884.00		↓	884.00
SS/M018 (OA3)	Number of new telecare users.	100.00	250.00		110.00	309.00		↑	309.00
SS/M019a (OA3)	Rate per 1,000 population of over 65s who have had a UA assessment.	95.00	43.60		42.00	31.52		↓	42.00
SS/M019b (OA3)	Rate per 1,000 population of over 65s who have had an OT assessment.	40.00	32.40		33.00	31.96		↓	33.00
SS/M020 (OA3)	Percentage of complaints received by or on behalf of people over 65, which have resulted in service modification or improvement.	50.00%	75.00%		50.00%	100.00%		↑	50.00%
SS/M021 (OA3)	Number of adult service users receiving a direct payment.	110.00	122.00		120.00	143.00		↑	143.00
SS/M022 (OA3)	Percentage of community supported clients receiving 20 hours or more care per week.	20.00%	18.10%		25.00%	19.30%		↑	30.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SS/M005	Number of Tele V packages provided throughout the year.		189.00		200.00	240.00		↑	280.00
SS/M006	Number of Tele V+ packages provided throughout the year.		61.00		100.00	69.00		↑	100.00

Outcome 2: The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion.

Objective 2: Through the Council working in coordination with other organisations, to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation.

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SCC/013ai	The percentage of open cases of children on the Child Protection Register who have been allocated a social worker.	100.00%	100.00%	99.00%	100.00%	100.00%			100.00%
SCC/013aii	The percentage of open cases of children looked after who have an allocated social worker.	100.00%	100.00%	95.20%	100.00%	100.00%			100.00%
SCC/103aiii	The percentage of open cases of children in need who have an allocated social worker.	60.00%	70.02%	76.40%	70.00%	72.04%			72.00%
SCA/007 (PAM)	The percentage of clients with a care plan at 31 March whose care plans should have been reviewed that were reviewed during the year.	87.00%	78.30%	81.10%	87.00%	75.69%			81.00%
SCC/024	The percentage of children looked after during the year with a Personal Education Plan within 20 school days of entering care or	65.00%	40.00%	62.70%	65.00%	97.14%			97.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
	joining a new school in the year ending March 31.								
SCC/034 (NSI/PAM)	The percentage of child protection reviews carried out within statutory timescales during the year.	100.00%	99.36%	98.10%	100.00%	98.95%			100.00%
SS/M007	The number of direct payments provided during the year.		50.00		50.00	56.00		↑	75.00
SS/M008a	The number of Home Care packages provided for less than 5 hours per week.		226.00		226.00	198.00		↓	198.00
SS/M008b	The number of Home Care packages provided for 5-9 hours per week.		268.00		268.00	243.00		↓	243.00
SS/M008c	The number of Home Care packages provided for 10-19 hours per week.		390.00		390.00	402.00		↑	402.00
SS/M008d	The number of Home Care packages for more than 20 hours per week.		187.00		187.00	202.00		↑	202.00
SS/M008e	The total number of Home Care Packages provided.		1,071.00		1,071.00	1,045.00		↓	1,045.00
SS/M010	Percentage reduction in first time entrants to the Youth Justice System.	-5.00%	-29.00%		-5.00%	Awaiting YJB data			
SS/M011	Number of first time entrants to the Youth Justice System.	46.00	23.00		36.00	Awaiting YJB data			

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SCA/002a (IO2) (NSI)	The rate of older people (aged 65 or more) supported in the community per 1,000 population aged 65 or over at March 31.	50.00	47.49	74.48	50.00	41.13			41.00
SCA/002b (IO2) (NSI)	The rate of older people (aged 65 or more) whom the authority supports in care homes per 1,000 population aged 65 or over at March 31.	17.00	14.74	18.84	16.00	15.70			16.00
SCA/003a	The percentage of clients, in the following age groups, who are supported during the year aged 18-65.	90.00%	90.51%	93.84%	90.00%	89.80%			90.00%
SCA/003b	The percentage of clients, in the following age groups, who are supported during the year aged 65.	75.00%	81.12%	83.71%	75.00%	77.82%			78.00%
SCA/020 (PAM)	The percentage of adult clients who are supported in the community during the year.	80.00%	83.85%	86.63%	80.00%	81.13%			80.00%
SCC/002 (NSI)	The percentage of children looked after at 31 March who have experienced one or more changes of school, during a period or periods of being looked after, which were not due to	15.00%	16.36%	13.80%	13.00%	13.04%			13.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
	transitional arrangements in the 12 months to 31 March.								
SCC/004 (NSI/PAM)	The percentage of children looked after on 31 March who have had three or more placements during the year.	10.00%	10.40%	8.30%	9.00%	6.88%			9.00%
SCC/022a	The percentage of attendance of looked after pupils whilst in care in primary schools.	95.00%	94.25%	95.10%	95.00%	94.48%			100.00%
SCC/022b	The percentage attendance of looked after pupils whilst in care at secondary schools.	91.00%	87.61%	91.60%	91.00%	90.05%			92.00%
SCC/033d (NSI)	The percentage of young people formerly looked after with whom the authority is in contact at the age of 19.	95.00%	100.00%	93.40%	95.00%	100.00%			98.00%
SCC/033e (NSI)	The percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non-emergency accommodation at the age of 19.	95.00%	92.59%	92.70%	95.00%	92.86%			95.00%
SCC/033f (OA2) (IO4)	The percentage of young people formerly looked after with whom the authority is still in	50.00%	44.44%	54.80%	52.00%	57.14%			60.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
(NSI)	contact, who are known to be engaged in education, training or employment at the age of 19.								
SCC/035	The percentage of looked after children eligible for assessment at the end of Key Stage 2 achieving the Core Subject Indicator, as determined by Teacher Assessment.	60.00%	58.33%	51.64%	60.00%	60.00%			60.00%
SCC/036	The percentage of looked after children eligible for assessment at the end of Key Stage 3 achieving the Core Subject Indicator, as determined by Teacher Assessment.	30.00%	40.00%	37.22%	40.00%	50.00%			50.00%
SCC/037 (NSI)	The average external qualifications points score for 16 year old looked after children, in any local authority maintained learning setting.	200.00	347.59	262.00	200.00	224.00			200.00
SCC/044a	The percentage of children looked after who were permanently excluded from school during the previous academic year.	0.00%	1.27%	1.00%	0.00%	0.00%			0.00%
SCC/044b	The average number of days spent out of	7 days	14 days	6.80 days	6 days	15.50 days			7 days

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
	school on fixed-term exclusions for children looked after who were excluded during the previous academic year.								
SCY/001a	The percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system by: Children and young people of statutory school age.		12.90%	1.20%	Awaiting YJB data				
SCY/001b	The percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system, by: Young people above the statutory age.		21.60%	16.10%	Awaiting YJB data				
SCY/002a	The percentage change in proportion of children and young people in the youth justice system with suitable accommodation: at the end of their court order compared with before the start of their court order.		-1.60%	-1.70%	Awaiting YJB data				

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SCY/002b	The percentage change in the proportion of young people in the youth justice system with suitable accommodation: upon their release from custody compared with before the start of their custodial sentence.		0.00%	5.30%	Awaiting YJB data				
SCY/003a	The percentage of children and young people in the youth justice system identified via screening as requiring a substance misuse assessment that commence the assessment within 5 working days of referral.		81.82%	90.40%	Awaiting YJB data				
SCY/003b	The percentage of those children and young people with an identified need for treatment or other intervention, who receive that within 10 working days of the assessment.		97.00%	96.60%	Awaiting YJB data				
SCA/019 (OA3) (NSI/PAM)	The percentage of adult protection referrals completed where the risk has been managed.	95.00%	100.00%	94.45%	95.00%	100.00%			100.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SCC/011a (PAM)	The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker.	65.00%	67.38%	78.90%	68.00%	66.77%			70.00%
SCC/011b (NSI)	The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the Social Worker.	30.00%	21.51%	42.90%	30.00%	29.99%			30.00%
SCC/014	The percentage of child protection conferences due in the year which were held within 15 working days of the strategy discussion.	100.00%	97.98%	89.90%	100.00%	99.28%			100.00%
SCC/015	The percentage of initial child protection conferences due in the year which were held within 10 working days of the initial child protection conference.	90.00%	95.12%	90.00%	92.00%	99.12%			99.00%
SCC/021	The percentage of looked after children reviews carried out within statutory timescales during the year.	95.00%	97.27%	95.90%	100.00%	95.94%			100.00%
SCC/025 (PAM)	The percentage of statutory visits to looked after children due in the year that	95.00%	95.29%	85.30%	95.00%	94.49%			95.00%

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
	took place in accordance with regulations.								
SCC/040	The percentage of placements started during the year where the child is registered with a provider of general medical services within 10 working days of the start of the placement.	90.00%	98.60%	88.30%	95.00%	96.70%			97.00%
SCC/020	The percentage of looked after children who have had their teeth checked by a dentist during the year.		56.62%	85.10%	50.00%	61.76%			63.00%
SS/M013	Percentage of funded providers (outside of Community care and care homes) to receive a minimum 2 contract meeting in financial year.		60.00%		80.00%	93.75%		↑	90.00%

Outcome 3: Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals.

Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning plans, and to help ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities.

PI Ref	PI Description	Target 2013/14	Performance 2013/14	Wales Average 2013/14	Target 2014/15	Performance 2014/15	Wales Average 2014/15	Direction of travel	Target 2015/16
SS/M012	Percentage of places on appropriate training courses made available to non-council employees.	25.00%	27.59%		25.00%	28.51%		↑	25.00%

Appendix 3: Social Services Workforce Plan 2015/19

Ref	Actions	Outcomes	Milestones	Lead Officer	By when	Resources required
1.	Recruitment to key frontline posts	Stability in workforce, further reduced reliance on agency staff	Permanent recruitment	Heads of Service	Ongoing	Corporate support to streamline recruitment process
2.	Improve succession planning	Directorate is confident that there are internal candidates for any vacancies as they arise	Training Programme to support staff in acquiring new skills	Heads of Service	Ongoing	Corporate guidelines for succession planning
3.	Implement the new career pathway for social workers	Clear expectations re roles for social workers	Respond to national framework and guidance as it is issued	Heads of Service	Date to be agreed	Engagement with HR and Job Evaluation as appropriate
4.	Support staff in implementing the Social Services and Well-being Act	Staff are prepared for the transition and structures are fit for purpose	Develop an effective implementation plan	Heads of Service	Initial plan March 2015	Implementation Lead Officer plus existing staff resources

Appendix 4: Social Services Savings

Saving				
Title of saving	Description of saving	15/16 £000	16/17 £000	17/18 £000
Children and Young People Services				
Mainstream out of area residential placements.	Reduce the numbers of mainstream young people in out of County residential placements by approximately 1 per year.	150	150	0
General budget reduction.	Budget reduction on all controllable budget lines.	20	0	0
Staffing review	Reconfigure staffing based on provision of highest priority services	100	100	0
Review short breaks-Family based respite.	Review provision of short breaks.	60	0	0
Car mileage	Changes to car mileage scheme	13	0	0
Total for Children and Young People Services		343	250	0
Adult Services				
Care packages Budget Reduction	Targeted reduction in specific care package budgets.	125	300	0
Supported accommodation learning disabilities.	Retender, use of Telecare and reviews, moving residential clients to new accommodation and maximising use of Supported People.	25	0	0
Residential Services	To review the way in which residential services are provided.	300	300	0
SLA review	Review current SLAs	66	0	0
Care Management Team reconfiguration	Reconfiguration of Care Management Teams.	50	0	0
Day Service modernisation	Review day service.	27	0	0
Adult Placement Scheme	Review the potential for use of alternative service providers.	25	0	0
Team budget reductions	Review team budgets (including building and staffing costs).	300	0	0
Car mileage	Changes to car mileage scheme.	33	0	0

Saving				
Title of saving	Description of saving	15/16 £000	16/17 £000	17/18 £000
Transport Review	Savings resulting from a review of the management of transport	5	13	0
Reshaping Services	Review of provision of services.	0	0	320
Total for Adult Services		956	613	320
Business Management and Innovation				
Funding to carers support services	Reduce level of development in service.	27	0	0
Review Business Management section	Review all functions within the service.	75	0	0
Car mileage	Changes to car mileage scheme.	3	0	0
Energy	Review of energy costs.	61	0	0
Block contract arrangements for Domiciliary Care.	Move from spot purchase to block purchase of domiciliary care support for adults in the community.	0	270	0
Total for Business Management and Innovation		166	270	0
Youth Offending Service				
Energy	Review of energy costs.	3	0	0
Total for Youth Offending Service		3	0	0
Total for Social Services		1,468	1,133	320